

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
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TOTAL IND.	2		↓			↓			↓		
TOTAL DEP.	11	←		←		←		←		←	
TOTAL CLAIMS	13										

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS